



May 21, 2020

Web Announcement 2204

Obstetric Anesthesia Codes Payment Methodology

Attention Provider Types 12 (Hospital, Outpatient), 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurses), 72 (Nurse Anesthetist) and 77 (Physician's Assistant): Effective with claims processed on or after March 16, 2020, the payment methodology for the following obstetric anesthesia procedure codes has been updated to reimburse providers using an occurrence-based rate. Providers are instructed to bill as an occurrence-based service going forward; one unit for the occurrence and no time-based units. It is not necessary to resubmit or adjust claims that were submitted and reimbursed with time-based units before March 16, 2020.

The impacted Current Procedural Terminology (CPT) codes are:

Procedure Code	Procedure Code Description
01967	Neuraxial labor analgesia/anesthesia for planned vaginal delivery
01968	Anesthesia for cesarean delivery following neuraxial labor analgesia/anesthesia
01969	Anesthesia for cesarean hysterectomy following neuraxial labor analgesia/anesthesia